



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 9671

|   |   |  |   |   |                           |                                |
|---|---|--|---|---|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/723,775  | <b>FILING or 371(c) DATE</b><br>11/26/2003<br><b>RULE</b>   | <b>CLASS</b><br>370                                      | <b>GROUP ART UNIT</b><br>2416   | <b>ATTORNEY DOCKET NO.</b><br>40101/09501 |                           |                                |
| <b>APPLICANTS</b><br>Delia Kecskemeti, Kanata, CANADA;<br><b>** CONTINUING DATA *****</b> none<br><b>** FOREIGN APPLICATIONS *****</b> /JM/ 6/12/07<br>none<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>02/26/2004   |   |  |   |   |                           |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and Acknowledged <u>/JASON E MATTIS/</u><br>Examiner's Signature |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>CANADA   | <b>SHEETS DRAWINGS</b><br>18              | <b>TOTAL CLAIMS</b><br>25 | <b>INDEPENDENT CLAIMS</b><br>8 |
| <b>ADDRESS</b><br>FAY KAPLUN & MARCIN, LLP<br>150 BROADWAY, SUITE 702<br>NEW YORK, NY 10038<br>UNITED STATES  |   |  |   |   |                           |                                |
| <b>TITLE</b><br>System and method for efficient sftorage and processing of IPV6 addresses   |   |  |   |   |                           |                                |
| <b>FILING FEE RECEIVED</b><br>1290  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                           |                                |